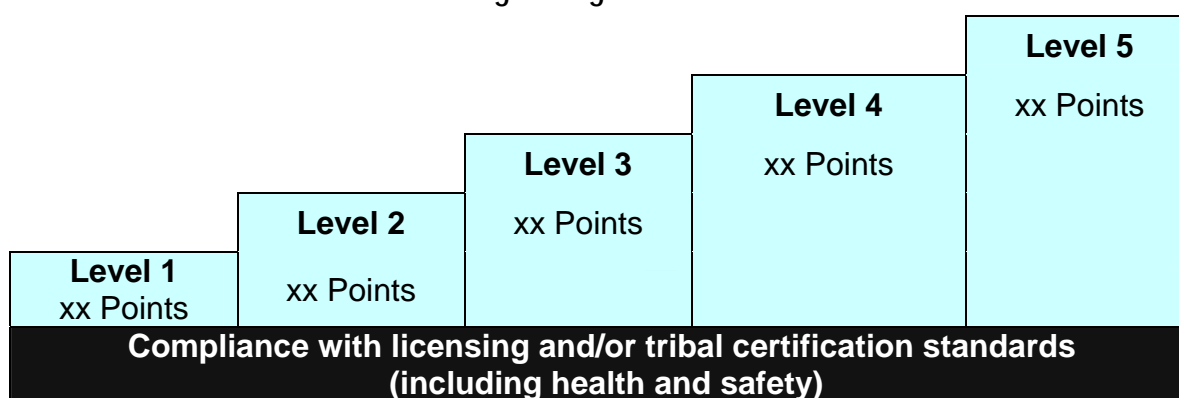


Washington State Quality Rating & Improvement System Addendum QRIS Model Preliminary Design -Preliminary System Elements

NOVEMBER 10, 2005

Note: Levels of the QRIS are designed to align with progress towards accreditation (where level 5 represents the accreditation standards - or their equivalent – for the corresponding care setting, e.g. center, family home, school age program.) Points have not yet been determined; some levels are indicated.

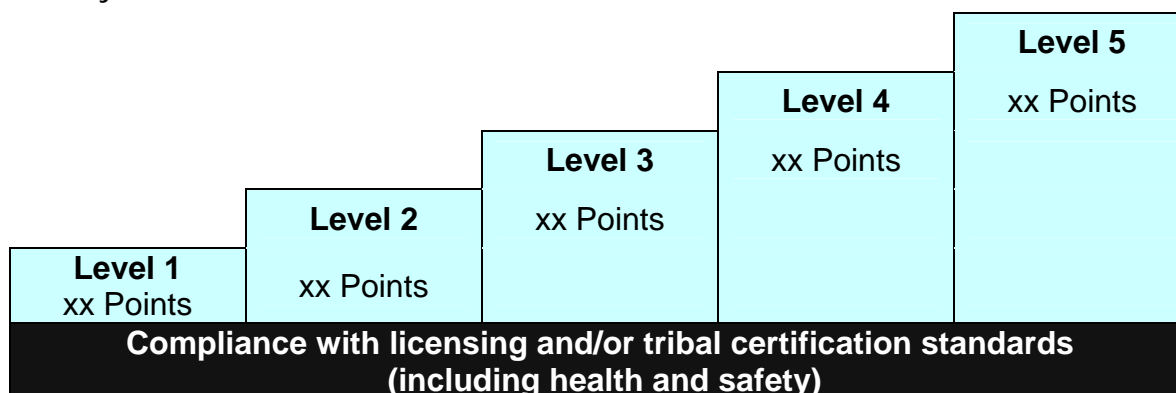
Child Care Centers and School Age Programs



Categories for Quality Indicators

Category	Possible Points
<i>Professional Development: Teacher Qualifications; Director Qualifications</i>	xx
<i>Curriculum and Learning Environment</i>	xx
<i>Management Practices</i>	xx
<i>Parent/Family and Community Partnerships</i>	xx
<i>Quality Improvement and Program Assessment</i>	xx
Total	xx

Family Child Care Homes



Categories for Quality Indicators

Category	Possible Points
<i>Professional Development: Provider and Assistant Qualifications</i>	xx
<i>Curriculum and Learning Environment</i>	xx
<i>Management Practices</i>	xx
<i>Parent/Family and Community Partnerships</i>	xx
<i>Quality Improvement and Program Assessment</i>	xx
Total	xx

Professional Development: Teacher Qualifications; Director/Program Supervisor Qualifications --

Child Care Centers and School Age Programs (xx points maximum)

Core/Mandatory Requirements

Level

Compliance with licensing and/or tribal certification standards (basic health and safety)	1
---	---

Leadership Development

Develop training and education plan for Board members (<i>if appropriate?</i>) and succession plan for key staff	4
Implement training and education plan for Board members (<i>if appropriate?</i>) and succession plan for key staff	5

Director/Program Supervisor

Director/Program supervisor working towards AA degree or 90 college credits (<i>is this consistent with for licensing??</i>)	1
Director/Program supervisor has AA or 90 college credits towards 4-year degree	2
Director/Program supervisor is working towards BA or 90+ college credits	3
Director/Program supervisor has BA	4

Lead Teachers/Group Leaders

Aligned with 2006 NAEYC Standard

Level

<ul style="list-style-type: none"> 25% of teachers have CDA (or 12 ECE credits or afterschool care equivalent), ECE certificate (or 45 credits), AA (or 90 college credits towards a degree), BA or higher All teachers have or are working on CDA, AA or BA with annual reports showing continuous improvement 	2
<ul style="list-style-type: none"> 50% of teachers have CDA (or 12 ECE credits or afterschool care equivalent), ECE certificate (or 45 credits), AA (or 90 college credits towards degree), BA or higher All teachers have or are working on CDA, AA or BA with annual reports showing continuous improvement 	3
<ul style="list-style-type: none"> 75% of teachers have CDA (or 12 ECE credits), ECE/AS certificate (or 45 credits), AA (or 90 college credits towards degree), BA or higher All teachers have or are working on CDA, AA or BA with annual reports showing continuous improvement 	4
<ul style="list-style-type: none"> All teachers have CDA (or 12 ECE credits or afterschool care equivalent) and 25% of teacher have AA, (90 college credits towards BA), BA or higher; All teachers have or are working on AA or BA with annual reports showing continuous improvement 	5

Lead Teachers/Group Leaders

Aligned with 2010 NAEYC Standard

Level

<ul style="list-style-type: none"> All teachers have CDA (or 12 ECE credits or afterschool care equivalent) and 25% of teachers have AA, (90 college credits towards BA), BA or higher; All teachers have or are working on an AA or BA with annual reports showing continuous improvement 	2
<ul style="list-style-type: none"> 25% of teacher have AA, (90 college credits towards BA), BA or higher All teachers have or are working on AA or BA with annual reports showing continuous improvement 	3
<ul style="list-style-type: none"> 25% of teacher have AA, (90 college credits towards BA), BA or higher All teachers have or are working on AA or BA with annual reports showing continuous improvement 	4
<ul style="list-style-type: none"> 50% of teacher have AA (90 college credits towards BA) or higher, 25% of teacher have BA or higher; All teachers have or are working towards a BA with annual reports showing continuous improvement 	5

Note: timeline for professional development would follow NAEYC accreditation standards-- all lead teachers would have a BA by 2020. AA and BA degrees should be in early childhood education (ECE), child family studies (CFS), early childhood special education (ECSP) or equivalent which would include at least **45 college quarter credits for an AA** or **54 college quarter credits for a BA** that are completed in ECE, CFS, or ECSP for a BA. For afterschool providers AA and BA degrees may also include youth studies, recreation, family social sciences, and elementary education.

Assistant Teachers	Level
50% of assistant teacher meet STARS* requirement within 6 months (<i>consistent w/licensing??</i>)	1
100% of assistant teachers meet STARS* requirement within 6 months	2
At least 25% of assistant teacher have CDA or 12 college credits	3
At least 50% of assistant teacher have CDA or 12 college credits	4

*STARS (*State Training And Registry System*) refers to the basic and on-going training required by state licensing standards for center teachers, directors, program supervisors and family child care providers and assistants.

Professional Development: Provider Qualifications -- *Family Child Care Homes* (xx points maximum)

This category includes educational and experience growth of the provider. It recognizes STARS** hours, college credits, and the years in the profession--all valuable tools to raise quality. Points are cumulative.

Core/Mandatory Requirements	Level
Compliance with licensing and/or tribal certification standards (basic health and safety)	1
Completion of 5 hours of Diversity Training and 5 hours of Special Needs Training every three years	4
Participation in Peer Mentoring	2
Membership in Professional Organization	3
Accreditation or equivalent	5

Additional Elements	Points
Assistant FCC Provider meetings initial STARS** 20 hours and 10 continuing education every year	
Provide STARS** training	
Completion of 45 STARS** hours over three years in NAFCCA* accredited content areas (minimum of 3 hours in each area) or 3 ECE or equivalent college credits	
Completion of 60 STARS** hours over three years in NAFCCA* accredited content areas (minimum of 5 hours in each area) or 6 ECE or equivalent college credits	
Completion of 90 STARS** hours over three years in NAFCCA* accredited content areas (minimum of 15 in each content area) or 9 ECE or equivalent college credits	

Working towards CDA	
CDA credential	
1 year ECE/After School certificate	
AA in ECE or related field	
BA in ECE, related field or higher	

*NAFCCA accredited content areas are Relationships, Environment, Development and Learning Activities, Health & Safety, and Professional and Business Practices

**STARS (*State Training And Registry System*) refers to the basic and on-going training required by state licensing standards for family child care providers and assistants and center teachers, directors, program supervisors.

***The Family Child Care Home workgroup suggested the following approach to incentives. Annual Quality Bonus: Providers would receive a bonus based on the highest level they have reached. Starting with \$100 at level 1, the bonus will grow by \$100 at each level.

Subsidy linked bonus: Would be raised knowing that subsidy rates are too low. We are raising the base subsidy rate from 35% to 55% of market rate. Bonuses would be an additional 4% per level. Taking the provider to 75% at level 5.

Curriculum & Learning Environment --

Child Care Centers and School Age Programs (xx points maximum)

Core/Mandatory Requirements

Level

Compliance with licensing and/or tribal certification standards (basic health and safety)	1
Teachers foster children's emotional well-being by demonstrating respect for children and creating a positive emotional climate as reflected in teacher behaviors such as frequent social conversations, joint laughter, and affection.	2
Accreditation or equivalent	5

Additional Elements

Points

Teachers support children's development of friendships, social skills, conflict resolution, and expression of feelings and empathizing with those of other children by actively teaching children social, communication, and emotional regulation skills.	
For children with persistent, serious, and challenging behaviors, teachers, families and other professionals work as a team to develop and implement an individualized plan that supports the child's inclusion and success.	
Teaching staff work as a team to implement daily teaching and learning activities, including Individualized Education Programs (IEPs), Individualized Family Service Plans (IFSPs) and other individualized plans as necessary.	
Teachers work to prevent challenging or disruptive behaviors through environmental design, schedules, transition and planned activities. Teachers have access to on-site professional consultation in child development and mental health strategies.	
Programs conduct individual child assessments as an integral part of the program, including a variety of procedures such as observations, checklists, rating scales, and individually administered tests. These assessments are used to support children's learning through continually updated individualized learning plans.	

Teachers observe and document children's work, play, behaviors, and interactions to assess progress, using the information gathered to plan and modify the curriculum and their teaching strategies.	
Teachers use curriculum in all content and developmental domains as a flexible framework for teaching and to support the development of daily plans and learning experiences. Curriculum and planning cover the entire time children are in the program each day.	
Teaching teams meet at least one hour weekly, when not supervising children, to interpret and use assessment results to align curriculum and teaching practices to the interests and needs of children.	
Teachers, families, and relevant specialists have regular opportunities to participate in two-way communication conferences to discuss each child's progress, accomplishments, difficulties in the classroom and at home, and to plan learning activities.	
Within 6 weeks after enrollment, and as age-appropriate thereafter, records indicate that children have been screened for developmental delays, and that a qualified health provider (accessed by the program or the family) has assessed children health condition and assured that immunizations are up-to-date. A plan exists to assure that child needing assistance have been referred for any needed services, with follow-up to assure that child has received these services in a timely manner. Children have Individual Health Plans approved by a qualified health providers to assist in meeting the child's health needs while at the program.	
In order to coordinate support of the child's development by parents, teachers, at home and the center, teachers will do 2 home visits a year, and have 2 parent conferences a year. Parents will be encouraged to participate, but may opt for 4 conferences as an alternative.	
Each classroom has at least 5 well-equipped, clearly defined learning centers	
Each classroom has written weekly lesson plans with 15 minutes of reading/early literacy activities daily	
Program incorporates cultural and family traditions in every day practices and care for children	
Program practices are inclusive of children with special needs	
Accreditation (National Association for the Education of Young Children (NAEYC), National After School Association (NAA), Head Start Performance Standards, or other recognized accrediting body	

Curriculum & Learning Environment -- Family Child Care Homes (xx points maximum)

Family child care programs provide services in their own homes, designing space and furnishings that suit both living and child care, and adapting learning environments that reflect real life situations. The main goal is to prepare children cognitively, emotionally, and socially for school and life. This can only be done hand and hand with parents and community.

Core/Mandatory Requirements

Level

Compliance with licensing and/or tribal certification standards (basic health and safety)	1
Evidence of multicultural materials and sharing culture and diversity of children in care	2
Communication and involvement of parents in program	4
Yearly child assessment	4

Individualized portfolios used	5
Accreditation or equivalent	5

Additional Elements

Points

Well equipped learning environment	
Be involved in a peer mentoring program	
Membership in professional organization	
Learning environment intentionally supports acquisition of skills and knowledge for all ages, including reading	
Evidence of child and provider directed exploration	
Yearly meeting with kindergarten teachers	
Using data and program assessments to drive continuous quality improvement	
Evidence of self assessment	
Accreditation	

Family and Community Partnerships -- Child Care Centers (xx points maximum)

Core/Mandatory Requirements

Level

Compliance with licensing and/or tribal certification standards (basic health and safety)	1
The program provides information about the program to families in a language the family can understand.	2
Program staff establish intentional practices from the first contact with families designed to foster strong reciprocal relationships and maintain them over time.	2
Program staff maintain information about child and family support services available in the community that are culturally and linguistically appropriate.	2
When program staff suspect that a child has a developmental delay or other special need, this possibility is communicated to families in a sensitive, supportive, and confidential manner, with documentation and explanation for the concern, suggested next steps, and information about resources for assessment.	2
Program staff ensure that all families, regardless of family structure; socioeconomic, racial, religious and cultural backgrounds; gender; abilities; or preferred language, are included in all aspects of the program, including volunteer opportunities. These opportunities consider families' interests and skills and the needs of program staff.	3
Program staff develop partnerships and professional relationships with agencies, consultants and organizations that further the program's capacity to meet the needs of the children and families they serve.	3
Program staff use a variety of formal and informal methods to communicate with families about the program philosophy and curriculum objectives, including educational goals and effective strategies that can be used by families to promote their children's learning. They implement a variety of methods, such as new family orientations, small group meetings, individual conversations, and written questionnaires, for getting input from families about curriculum activities throughout the year.	4
Program staff are encouraged to participate in local, state, or national early childhood organizations and in public-awareness activities related to early care and education.	4
Accreditation or equivalent	5

Additional Elements

Points

Culture and Diversity	
Staff develop skills and knowledge to work effectively with diverse families.	
To better understand the cultural backgrounds of children, families, and the community, program staff (as a part of program activities or as individuals) participate in community cultural events, concerts, storytelling activities, or other events and performances geared to children and their families.	
Staff know how to access services and consultants who are able to provide culturally and linguistically appropriate services to children and families.	
Knowing and communicating with families	
Program staff use a variety of formal and informal strategies (including conversations) to become acquainted with and learn from families about their family structure; their preferred child-rearing practices; and their socioeconomic, linguistic, racial, religious and cultural backgrounds.	
The program works with families on shared child caregiving issues, including routine separations, special needs, the food being served and consumed, and daily care issues.	
The program facilitates opportunities for families to meet with each other on a formal and informal basis, work together on projects to support the program, and learn from and provide support for each other.	
Program staff and families work together to plan events.	
Program staff use a variety of mechanisms, such as family conferences or home visits, to promote dialogue with families.	
Program staff communicate with families on a daily basis (infant/toddler) or at least a weekly basis (pre-school/kindergarten) regarding children's activities and developmental milestones, shared caregiving issues, and other information that affects the well-being and development of their children. Where in-person communication is not possible, alternative communication practices are in place.	
Program staff use a variety of techniques to negotiate difficulties that arise in their interactions with family members. Program staff make arrangements to use these techniques in a language the family can understand.	
Curriculum and Instruction	
Program staff actively use information about families to adapt the environment, curriculum, and teaching methods to the families they serve.	
Program staff engage with families to learn from their knowledge of their child's interests, approaches to learning, and the child's developmental needs, and to learn about their concerns and goals for their children. This information is incorporated into ongoing classroom planning.	
Program staff inform families about its systems for formally and/or informally assessing children's progress. This includes the purposes of the assessment, the procedures used for assessment, procedures for gaining family input and information, the timing of assessments, the way assessment results or information will be shared with families, and ways the program will use the information.	
Program staff connect with and use their community's urban, suburban, rural and/or tribal cultural resources.	
The program engages with other community organizations and groups to cosponsor or participate in cultural events to enrich the experience of children, staff and families in the	

program.	
Family Support	
Program staff provide support and information, including information on parenting issues, to family members legally responsible for the care and well-being of a child.	
Program staff encourage and support families to make the primary decisions about services that their children need, and they encourage families to advocate to obtain needed services.	
Program staff provide families with information about programs and services from other organizations. Staff support and encourage families' efforts to negotiate health, mental health, assessment, and educational services for their children.	
Prior to sharing information with other relevant providers, agencies, or other programs, staff obtain written consent from the family.	
Program staff encourage continuity of services for children by communicating with other agencies and programs to achieve mutually desired outcomes for children and guide collaborative work.	
The program encourages staff to participate in joint and collaborative training activities or events with neighboring early childhood program and other community service agencies.	
Program offers parent education opportunities.	
Communicating on the Program	
The program's governing or advisory groups include families as members and active participants. Family members are mentored into leadership roles by staff or other families in the program.	
Program staff encourage families to regularly contribute to decisions about goals for their child and plans for activities and services.	
Program staff encourage families to raise concerns and work collaboratively with them to find mutually satisfying solutions that staff then incorporate into classroom practice.	
Program staff advocate for the program and its families by creating awareness of the program's needs among community councils, service agencies, and/or local governmental agencies.	
Program leadership builds mutual relationships and communicates regularly with close neighbors, informing them about the program, seeking out their perspectives, involving them in the program as appropriate, and cooperating with them on neighborhood interests and needs.	
Program staff include information gathered from stakeholders in planning for continuous improvement, building stakeholder involvement in the program, and broadening community support for the program.	
Transitions	
Program staff use established linkages with other early education programs and local elementary schools to help families prepare for and manage their children's transitions between programs, including special education programs. Staff provide information to families that can assist them in communicating with other programs.	
To help families with their transitions to other programs or schools, staff provide basic general information on enrollment procedures and practices, visiting opportunities, and/or program options.	
Program staff partner with kindergarten teachers on issues involving curriculum, school readiness and kindergarten transition.	

Family and Community Partnerships -- Family Child Care Homes (xx points maximum)

Core/Mandatory Requirements

Level

Compliance with licensing and/or tribal certification standards (basic health and safety)	1
Provider works toward knowing and understanding all the families in the program using a variety of strategies (may include home visits, taking a relevant to a family, etc)	2
Provider shares information between the child care provider and the parents to best support the parents and the child (including, but not limited to, child development, the child's experiences and how he/she learns within the environment of the program, and the home)	3
Provider makes adjustments to program and environment as is needed to provide for the children and families (i.e., for children with disabilities, diverse cultures, individual needs etc.)	4
Provider meets regularly with parents for the purpose of conferencing about the child's interests, strengths, development, and also provides ideas or resources to assist as needed	5
Accreditation or equivalent	5

Culture and Diversity	Points
Provider develops skills and knowledge to work effectively with diverse families	
To better understand the cultural backgrounds of children, families, and the community, provider participates in community cultural events, concerts, storytelling activities, or other events and performances geared to children and their families.	
Provider ensures that all families, regardless of family structure; socioeconomic, racial, religious and cultural backgrounds; gender; abilities; or preferred language, are included in all aspects of the program, including volunteer opportunities. These opportunities consider families' interests and skills and the needs of program staff.	
The program compiles and provides information about the program to families in a language the family can understand. This information includes program policies and operating procedures.	
Knowing and communicating with families	
Providers uses a variety of formal and informal strategies (including conversations) to become acquainted with and learn from families about their family structure; their preferred child-rearing practices; and their socioeconomic, linguistic, racial, religious and cultural backgrounds.	
Provider establishes intentional practices from the first contact with families designed to foster strong reciprocal relationships and maintain them over time.	
Provider works with families on shared child caregiving issues, including routine separations, special needs, the food being served and consumed, and daily care issues.	
Provider facilitates opportunities for families to meet with each other on a formal and informal basis, work together on projects to support the program, and learn from and provide support for each other.	
Provider and families work together to plan events. Families' schedules and availability are considered as part of this planning.	
Provider uses a variety of mechanisms, such as family conferences or home visits, to	

promote dialogue with families. Provider asks adults to translate or interpret communications as needed.	
Provider communicates with families on a daily basis (infant/toddler) or at least a weekly basis (pre-school/kindergarten) regarding children's activities and developmental milestones, shared caregiving issues, and other information that affects the well-being and development of their children. Where in-person communication is not possible, alternative communication practices are in place.	
Program staff use a variety of techniques to negotiate difficulties that arise in their interactions with family members. Program staff make arrangements to use these techniques <u>in a language the family can understand</u> .	
Curriculum and Instruction	
Provider actively uses information about families to adapt the environment, curriculum, and teaching methods to the families they serve.	
Provider engages with families to learn from their knowledge of their child's interests, approaches to learning, and the child's developmental needs, and to learn about their concerns and goals for their children. This information is incorporated into ongoing classroom planning.	
Provider informs families about its systems for formally and/or informally assessing children's progress. This includes the purposes of the assessment, the procedures used for assessment, procedures for gaining family input and information, the timing of assessments, the way assessment results or information will be shared with families, and ways the program will use the information.	
Family Support	
Provider provides support and information to family members legally responsible for the care and well-being of a child.	
When program staff suspect that a child has a developmental delay or other special need, this possibility is communicated to families in a sensitive, supportive, and confidential manner, with documentation and explanation for the concern, suggested next steps, and information about resources for assessment.	
Provider encourages and supports families to make the primary decisions about services that their children need , and they encourage families to advocate to obtain needed services.	
Provider provides families with information about programs and services from other organizations. Staff support and encourage families' efforts to negotiate health, mental health, assessment, and educational services for their children.	
Prior to sharing information with other relevant providers, agencies, or other programs, staff obtain written consent from the family.	
Communicating on the Program	
Provider uses a variety of formal and informal methods to communicate with families about the program philosophy and curriculum objectives, including educational goals and effective strategies that can be used by families to promote their children's learning. They implement a variety of methods, such as new family orientations, small group meetings, individual conversations, and written questionnaires, for getting input from families about curriculum activities throughout the year.	
The program's governing or advisory groups include families as members and active participants. Family members are mentored into leadership roles by the provider or other families in the program.	
Provider encourages families to regularly contribute to decisions about goals for their child	

and plans for activities and services.	
Provider encourages families to raise concerns and work collaboratively with them to find mutually satisfying solutions that the provider then incorporates into practice.	
Transitions	
Provider uses established linkages with other early education programs and local elementary schools to help families prepare for and manage their children's transitions between programs, including special education programs. Provider provides information to families that can assist them in communicating with other programs and basis general information about enrollment procedures and practices.	
Provider creates a portfolio (could be in book form) for each child that is valued by parents as a snapshot of the child, memories worth saving. (more than child development, but in a family friendly format)	

Provider is aware of (and routinely works with currently relevant) resources within the community, sharing these with parents	
Provider has a relationship with the school(s) the children use, and works with teachers (and others as appropriate) in a proactive ways (i.e. planning transition to kindergarten strategies with K teacher, participating in IEP meetings etc)	
Provider actively seeks a variety of ways for families to be involved in the program, (which could include working together to plan special events and activities)	
Provider creates an advisory group of families (could also include other members of the community)	
Provider is involved in advocacy efforts that effect children	
Provider nurtures families as advocates of their children	
Providers works together with, encourages and supports families to participate in community improvement and advocacy projects	
Provider belongs to a professional organization	
Provider teaches outreach classes	
Provider implements a parent satisfaction survey (survey is developed or endorsed by the "validating agency"	

Management Practices --

Child Care Centers and School Age Programs (xx points maximum)

Core/Mandatory Requirements

Level

Compliance with licensing and/or tribal certification standards (basic health and safety)	1
An identified philosophy statement exists and is shared with consumers	2
Each teacher has a professional development plan in place that assists them in advancing in their qualifications and each center has a center-wide professional development plan that assist them in advancing their program	2
Sufficient time is given to complete ongoing professional development requirements	2
Wage scale reflects staff qualifications and rewards increased training and education levels, and is comparable regionally to similarly qualified positions	3
Accreditation or equivalent	5

Additional Elements

Points

Staff complete annual goals in their professional development plan	
Offer Staff benefits including at least 2 of the following: paid holidays, paid vacations and/or health benefits	
Substantial time is given for preparation and planning	
Director/Program Supervisor allow sufficient time for Networking with business professionals	
Business training in employment law and liability insurance requirements	
Training in basic accounting and establishment of computer generated accounting statements	
Program has a business or strategic plan	
Program has an operating budget, process for monitoring budget, and financial policies and procedures in place to implement sound fiscal accountability	
The program is organized and staff to minimize the number of group, teacher, and classroom transitions experiences by an individual child during the day	

Management Practices -- *Family Child Care Homes* (xx points maximum)

Family child care programs provide services in their own homes, designing space and furnishings that suit both living and child care, and adapting learning environments that reflect real life situations. The main goal is to prepare children cognitively, emotionally, and socially for school and life. This can only be done hand and hand with parents and community.

Core/Mandatory Requirements

Level

Compliance with licensing and/or tribal certification standards (basic health and safety)	1
An identified philosophy statement exists and is shared with consumers	2
Business owner has a professional development plan in place	2
Sufficient time off is set aside to complete ongoing professional development requirements	2
Accreditation or equivalent	5

Additional Elements

Points

Business owner has a professional development plan in place for staff	
Annual progress is made toward professional development goals	
Sufficient is set aside for preparation and planning	
Business training in employment law and liability insurance requirements	
Business owner's program is covered by insurance including accident insurance for child and employed assistance, liability insurance, and vehicle insurance (if transporting children)	
Training in basic accounting and establishment of computer generated accounting statements	

Program has a business plan	
Where possible paid time-off is negotiated with parents	
Provider has been in business for five/six/seven consecutive years	

Quality Improvement and Program Assessment --

Child Care Centers and School Age Programs (xx points maximum)

As programs develop expertise in self-examination and quality improvement, they will progress along the spectrum of understanding assessment to performing self-assessments to receiving externally validated assessments. As programs advance in the assessment process, they will also progress from developing quality improvement plans to implementing the plans, to improving in quality as a result. Points are cumulative, not to exceed xx for this category.

Core/Mandatory Requirements

Level

Compliance with licensing and/or tribal certification standards (basic health and safety)	1
Program has received training on assessment tools (from an approved list, such as ECERS, ITES, SAERS, Creative Curriculum, High Scope, etc.); this includes tools that encompass cultural relevancy, children with special needs, and teacher-child interactions	2
Mentor/coach interaction is evidenced	2
Program implements a family satisfaction survey	3
Program implements a staff satisfaction survey	3
In coordination with coach/mentor, program develops and implements a written quality improvement plan based on findings from self-assessment and parent satisfaction surveys	3
Documented annual use of quality improvement assessment process, using environment rating scales, accreditation self-study, or other approved methods performed by an independent (outside) monitor	4
Documented improvement in quality assessment by independent (outside) monitor	4
Accreditation or equivalent	5

Additional Elements

Points

Documented annual use of quality improvement assessment process, using environment rating scales, accreditation self-study, or other approved methods	
Program evidences building quality improvement plan	
Program evidences working/progressing on its quality improvement plan	
Documentation of child and/or program progress on pre-approved outcomes	

Quality Improvement and Program Assessment --

Family Child Care Homes (xx points maximum)

As providers develop expertise in quality improvement, they will progress along the spectrum of understanding assessment to performing self-assessments to receiving externally validated assessments. As programs advance in the assessment process, they will also progress from developing quality improvement plans to implementing the

plans, to improving in quality as a result. Points are cumulative, not to exceed xx for this category.

Core/Mandatory Requirements

Level

Compliance with licensing and/or tribal certification standards (basic health and safety)	1
Program has received training on assessment tools (from an approved list, such as FDCERS, Creative Curriculum, High Scope, etc.); this includes tools that encompass cultural relevancy, children with special needs, and teacher-child interactions	2
Mentor/coach interaction is evidenced	2
Program implements a family satisfaction survey	3
In coordination with coach/mentor, program develops and implements a written quality improvement plan based on findings from self-assessment and parent satisfaction surveys	3
Documented annual use of quality improvement assessment process, using environment rating scales, accreditation self-study, or other approved methods performed by an independent (outside) monitor	4
Documented improvement in quality assessment by independent (outside) monitor	4
Accreditation or equivalent	5

Additional Elements

Points

Documented annual use of quality improvement assessment process, using environment rating scales, accreditation self-study, or other approved methods	
Program evidences building quality improvement plan	
Program evidences working/progressing on its quality improvement plan	
Documentation of child and/or program progress on pre-approved outcomes	